

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

PLUMBERS &amp; PIPEFITTERS LOCAL UNION NO. 295 PAC

ADDRESS (number and street)

743 N BEACH STREET

☐Check if different  
than previously  
reported. (ACC)

DAYTONA BEACH

FL

32114

3279

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00147181

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☒April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2008

through

03

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

BRETT MIRSKY

Signature of Treasurer

Electronically Filed by BRETT MIRSKY

Date

04

01

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PLUMBERS &amp; PIPEFITTERS LOCAL UNION NO. 295 PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		14156.07
(b) Cash on Hand at Beginning of Reporting Period .....	14156.07	
(c) Total Receipts (from Line 19) .....	4555.71	4555.71
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	18711.78	18711.78
7. Total Disbursements (from Line 31) .....	4885.90	4885.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	13825.88	13825.88
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PLUMBERS &amp; PIPEFITTERS LOCAL UNION NO. 295 PAC

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 0 8

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	4555.71	4555.71
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	4555.71	4555.71
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	4555.71	4555.71
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	4555.71	4555.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4555.71	4555.71

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	541.92	541.92
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	4343.98	4343.98
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4885.90	4885.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4885.90	4885.90

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	4555.71	4555.71
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4555.71	4555.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 12

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC

**A.**

Full Name (Last, First, Middle Initial)

UNITED ASSOCIATION POLITICAL EDUCATION FUND

Mailing Address P O BOX 37800

City  
WASHINGTON

State  
DC

Zip Code  
20013-4307

Purpose of Disbursement  
PENNY FUND ASSESSMENT

Candidate Name

008  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB22.4845

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

312.05

**B.**

Full Name (Last, First, Middle Initial)

UNITED ASSOCIATION POLITICAL EDUCATION FUND

Mailing Address P O BOX 37800

City  
WASHINGTON

State  
DC

Zip Code  
20013-4307

Purpose of Disbursement  
PENNY FUND ASSESSMENTS

Candidate Name

008  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB22.4861

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

229.87

SUBTOTAL of Disbursements This Page (optional) .....

541.92

TOTAL This Period (last page this line number only) .....

541.92

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC

A.

Full Name (Last, First, Middle Initial)

BATTEN MADEWELL CPA LLC

Mailing Address 1326 S RIDGEWOOD AVE  
SUITE 18

City DAYTONA BEACH State FL Zip Code 32114-6190

Purpose of Disbursement  
PREPARATION OF FORM FEC3X

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4857

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

175.00

B.

Full Name (Last, First, Middle Initial)

BEHIND THE SCENES

Mailing Address 6159 SEQUOIA DR

City PORT ORANGE State FL Zip Code 32127

Purpose of Disbursement  
BOOKKEEPING

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4844

Date of Disbursement

01 / 22 / 2008

Amount of Each Disbursement this Period

60.00

C.

Full Name (Last, First, Middle Initial)

BEHIND THE SCENES

Mailing Address 6159 SEQUOIA DR

City PORT ORANGE State FL Zip Code 32127

Purpose of Disbursement  
BOOKKEEPING

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4862

Date of Disbursement

03 / 19 / 2008

Amount of Each Disbursement this Period

60.00

SUBTOTAL of Disbursements This Page (optional) .....

295.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) BEHIND THE SCENES	<b>Transaction ID:</b> SB29.4865 <b>Date of Disbursement</b>																				
Mailing Address 6159 SEQUOIA DR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City PORT ORANGE State FL Zip Code 32127	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement BOOKKEEPING	<table border="1"> <tr> <td colspan="10">15.00</td> </tr> </table>	15.00																			
15.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) BUILDING & CONSTRUCTION TRADES	<b>Transaction ID:</b> SB29.4840 <b>Date of Disbursement</b>																				
Mailing Address 815 16TH STREET NW SUITE 600	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	0	8												
City WASHINGTON State DC Zip Code 20006	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement LEGISLATIVE CONFERENCE REGISTRATION	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
Candidate Name	<table border="1"> <tr> <td>007</td> </tr> </table> Category/ Type	007																			
007																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) COUCHMAN PRINTING COMPANY	<b>Transaction ID:</b> SB29.4842 <b>Date of Disbursement</b>																				
Mailing Address 1634 S RIDGEWOOD AVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	0	8												
City SOUTH DAYTONA State FL Zip Code 32119	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PRINTING	<table border="1"> <tr> <td colspan="10">137.39</td> </tr> </table>	137.39																			
137.39																					
Candidate Name	<table border="1"> <tr> <td>006</td> </tr> </table> Category/ Type	006																			
006																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

452.39

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC

A.

Full Name (Last, First, Middle Initial)

COUCHMAN PRINTING COMPANY

Mailing Address 1634 S RIDGEWOOD AVE

City  
SOUTH DAYTONA

State  
FL

Zip Code  
32119

Purpose of Disbursement  
PRINTING

Candidate Name

006  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4847

Date of Disbursement

02 / 05 / 2008

Amount of Each Disbursement this Period

316.31

B.

Full Name (Last, First, Middle Initial)

ELECTRONIC AWARDS

Mailing Address 1831 N NOVA ROAD

City  
HOLLY HILL

State  
FL

Zip Code  
32114

Purpose of Disbursement  
T SHIRTS

Candidate Name

006  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4854

Date of Disbursement

02 / 29 / 2008

Amount of Each Disbursement this Period

280.10

C.

Full Name (Last, First, Middle Initial)

KATHERINE FERNANDEZ-RUNDLE

Mailing Address P O BOX 013077

City  
MIAMI

State  
FL

Zip Code  
33101

Purpose of Disbursement  
STATE ATTORNEY CAMPAIGN

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: FL District:

Transaction ID: SB29.4863

Date of Disbursement

03 / 21 / 2008

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1096.41

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC

A.

Full Name (Last, First, Middle Initial)

ADAM FETTERMAN

Mailing Address 481 SW PORT ST LUCIE BLVD  
SUITE B

City PORT ST LUCIE State FL Zip Code 34953

Purpose of Disbursement  
STATE CAMPAIGN CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: FL District: 81

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4866

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

FLORIDA AFL CIO

Mailing Address 135 S MONROE

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement  
DELEGATE REGISTRATION

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4852

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

125.00

C.

Full Name (Last, First, Middle Initial)

BRETT MIRSKY

Mailing Address 1225 EDNA DRIVE

City PORT ORANGE State FL Zip Code 32129

Purpose of Disbursement  
PER DIEM TO POLITICAL EVENT

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4858

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

198.00

SUBTOTAL of Disbursements This Page (optional) .....

823.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC

**A.**

Full Name (Last, First, Middle Initial)

TONY ORTIZ

Mailing Address 1621 E HILLCREST

City ORLANDO State FL Zip Code 32803

Purpose of Disbursement  
CITY COMMISSION CAMPAIGN CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: FL District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4850

Date of Disbursement

02 / 13 / 2008

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

TONY SASSO

Mailing Address 540 NEWPORT DRIVE

City INDIALANTIC State FL Zip Code 32903

Purpose of Disbursement  
STATE CAMPAIGN CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: FL District: 32

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4848

Date of Disbursement

02 / 13 / 2008

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

UA LOCAL UNION 295

Mailing Address 743 N BEACH STREET

City DAYTONA BEACH State FL Zip Code 32114

Purpose of Disbursement  
FLAGS

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4846

Date of Disbursement

01 / 22 / 2008

Amount of Each Disbursement this Period

164.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1164.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC

A.

Full Name (Last, First, Middle Initial)

UA LOCAL UNION 295

Mailing Address 743 N BEACH STREET

City DAYTONA BEACH State FL Zip Code 32114

Purpose of Disbursement  
POSTAGE

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4856

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

41.00

B.

Full Name (Last, First, Middle Initial)

UNITED ASSOCIATION POLITICAL EDUCATION FUND

Mailing Address P O BOX 37800

City WASHINGTON State DC Zip Code 20013-4307

Purpose of Disbursement  
PENNY FUND ASSESSMENT

Candidate Name

008  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4853

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

274.18

C.

Full Name (Last, First, Middle Initial)

OLIVER WINN

Mailing Address 278 SOUTH KINGS ROAD

City ORMOND BEACH State FL Zip Code 32174

Purpose of Disbursement  
PER DEIM TO CAMPAIGN EVENT

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4859

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

198.00

SUBTOTAL of Disbursements This Page (optional) .....

513.18

TOTAL This Period (last page this line number only) .....

4343.98